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## Facsimile Cover Sheet

To:		From:	
Name:	<u>James Orville Hansen</u>	Name:	<u>Richard W. White</u>
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Message: Re: Application 10/633,855  
Filing Date: August 4, 2003  
First Named: Sheng-Bin  
Group Art Unit: 3637  
Attorney Docket Number: SOU-102US

Please deliver this communication to  
Examiner James Orville Hansen, Group Art  
Unit 3637. Thank you.

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/633,855
	Filing Date	August 4, 2003
	First Named Inventor	Hsieh Sheng-Bin
	Art Unit	3637
	Examiner Name	James Orville Hansen
Total Number of Pages in This Submission	Attorney Docket Number	SOU-102US

ENCLOSURES <i>(check all that apply)</i>		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">         Amendment Transmittal Letter          Certificate of Facsimile       </div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Richard W. White, Reg. No. 50,601 Jansson, Shupe & Munger, Ltd. 245 Main Street, Racine, WI 53403
Signature	
Date	September 9, 2004

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 Name Judith Maresh Date 9/9/04  
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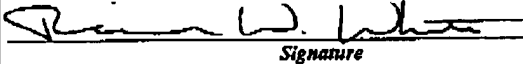
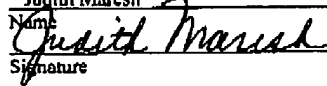
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O-9188 and select option 2.

SEP 09 2004

<b>AMENDMENT TRANSMITTAL LETTER (Small Entity)</b>					Docket No. SOU-102US	
Applicant(s): <b>Hsieh Sheng-Bin</b>						
Application No. <b>10/633,855</b>	Filing Date <b>August 4, 2003</b>	Examiner <b>James Orville Hansen</b>	Customer No. <b>24314</b>	Group Art Unit <b>3637</b>	Confirmation No. <b>5641</b>	
Invention: <b>CABINET WITH SOFT STORAGE DRAWERS</b>						
<b>COMMISSIONER FOR PATENTS:</b>						
Transmitted herewith is an amendment in the above-identified application.						
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						
The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	18 -	20 =	0 x	\$9.00	\$0.00	
INDEP. CLAIMS	3 -	3 =	0 x	\$43.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>10-0270</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>						
 Signature <b>Richard W. White, Reg. No. 50,601</b> <b>Jansson, Shupe &amp; Munger, Ltd.</b> <b>245 Main Street</b> <b>Racine, WI 53403</b>			Dated: <b>September 9, 2004</b>			
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CC:						

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PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In Re Patent Application of:

Hsieh Sheng-Bin

Serial No.: 10/633,855

Filed: August 4, 2003

Title: **CABINET WITH SOFT  
STORAGE DRAWERS**

Group Art Unit: 3637

Examiner: James Orville Hansen

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**AMENDMENT AND RESPONSE**

Sir:

**INTRODUCTORY COMMENTS**

In response to the Office Action mailed June 9, 2004, please amend the application as follows:

**Amendments to the Claims** are reflected in the listing of claims beginning on page 2 of this paper.

**Remarks** begin on page 7 of this paper.

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Judith Marsh

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